DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

	s claimed and for which a patent is sought on the invention entitled:
AROMATIC LIQUID-CRYSTALLINE	E POLYESTER FILM AND METAL LAMINATED
0, 4	ARTICLE
the application of which is attached hereto OR	☐ was filed on _July 18, 2003 as United States Application Number or PCT International Application Number, (Confirmation No), and was amended on (if applicable).
I hereby state that I have reviewed and understand the conby any amendment specifically referred to above.	tents of the above identified application, including the claims, as amended
I acknowledge the duty to disclose information which continuation-in-part application(s), material information w the national or PCT international filing date of the continua	is material to patentability as defined in 37 CFR 1.56, including for hich became available between the filing date of the prior application and tion-in-part application.
or plant breeder's rights certificate(s), or 365(a) of any PC than the United States of America, listed below and have	9(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's T international application(s) which designated at least one country other also identified below, by checking the box, any foreign application(s) for any PCT international application(s) having a filing date before that of the

•			Priority Claimed	
Prior Foreign Application Number(s)	Country	Foreign Filing Date	Yes	No
2002-213642	JAPAN	July 23, 2002	図	

application on which priority is claimed.

I hereby claim domestic priority benefits under 35 United States Code §120 of any United States application(s), §119(e) of any United States provisional application(s), or §365(c) of any PCT International application(s) designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in a listed prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge my duty to disclose any information material to the patentability of this application as defined in 37 C.F.R. 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Prior U.S. or International Application Number(s)

U.S. or International Filing Date

Status

I hereby appoint all attorneys of SUGHRUE MION, PLLC who are listed under the USPTO Customer Number shown below as my attorneys to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, recognizing that the specific attorneys listed under that Customer Number may be changed from time to time at the sole discretion of Sughrue Mion, PLLC, and request that all correspondence about the application be addressed to the address filed under the same USPTO Customer Number.



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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Given Name (first and middle [if any])		Family Name or Surname				
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Mailing Address:						
City	State	Zip	Country			
NAME OF FOURTH INVENTOR:						
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature	· · · · · · · · · · · · · · · · · · ·	Date				
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Mailing Address:						
City	State	Zip	Country			
NAME OF FIFTH INVENTOR:	· · · · · · · · · · · · · · · · · · ·					
Given Name						
(first and middle [if any])		Family Name or Surname				
Inventor's Signature		Date	1			
Residence: City	State	Country	Citizenship			
Mailing Address:						
City	State	Zip	Country			
						